Approved for use Drough 4502000, 0040 0051-000

U.S. Patient and Trademark Oldor, U.S. DEPARTMENT OF COMMENT

PATIENT APPLICATION FEE DETERMINATION RECORD

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PATENT APPLICATION FEE DETERMINATION RECORD								Application of the Country support		
Substitute for Form PTONETS								09/444 739		
CLAINS AS FILED - PART I										
(Column 1) (Column 2)					SWIT BUILLA		Q:R	OR OTHER THAN SHALL ENTITY		
FOR		NAMES FLE		BER EXTRA	7	T	ጉ .		FEMILY	
BASIC FEE (D) OFR L LO(A))				EN EATRA	RATE	FEE		- PATE	FEE	
TOTAL CLANES		20					OR.			
PROSPEROBIT O	- L	1	20- /	<u>/                                    </u>	] [:9.	1.1.	OR	x.18:	1	
(P) (PR 1,16(6))		4	20= - 4	+	1.43	1 /	OR	26.	<del>                                     </del>	
MATPLE DEPE	DENT CLAM PR		1 /	1:		<del> </del>				
		•• <u>145</u> -	+	<b>σ</b> ₹.	.,290	1.				
. If the difference	TOTAL	-0-	OR	TOTAL	-0 -					
	CLAIMS AS	AMENDE	D - PART II							
					••		•			
	(Cotton 1		(Column 2)	(Cotumn 3)	SMALL	ENTITY	OR!	OTHE	R THAN ENTITY	
<b>&lt;</b>	REMARK		HIGHEST	PRESENT	RATE				CVIII	
	AFTER AMERIDAE		PREVIOUSLY	EXTRA	PALE	TICHAL	•	PATE	ADD:	
Z Total	1.10	ويظا	PART FOR	<del> </del>	<del>  _</del>	FEE			FEE	
M Total (IV CIP) (IV	13 4	Name .	11/1		×19.		<b>O</b> R	x118.		
Til Caracaran	1 4		4	•	x:43-		OS.	×:86-		
HOTHER	+.145-		•							
	TOTAL		OR	-:280						
•					ADO'L FEE		OR:	TOTAL ADD'L FEE		
	, (Column 1)		(Column 2)	(Column 3)			:		<u> </u>	
0	CLAMS		HIGHEST				. ,	w.,	12 gam	
	AFTER		. NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADOK	
Z Total	AMENDMEN	Minn	PAID FOR		-	FEE /	•	<b>2.</b> * * * * * * * * * * * * * * * * * * *	FEE /	
O CONTURED	79				x: 9.	/	OR.	x . 18 =	7	
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ALEST MESSE	+.145.		- 4	<del>,                                     </del>						
	TOTAL	-/	OR!	+ 290	······································					
					ADOL FEE		OR"	TOTAL ADD'L FEE		
	(Column 1)		(Column 2)	(Cotemn 3)	•		٠	•	7	
	CLAMS		HIGHEST	<del>'</del>			ſ	<del> </del>	<del>/</del>	
	AFTER		MUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Total	AMENDMENT	Mora	PAID FOR		النيا	FEE	: 1		FEE	
07 078 LW00					1.9.1	•	OR	×:19 -		
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FIRST PROCESSO			COS		<del></del>					
FIRST PRESENT	1.115.		OR.	+ 2390						
					TOTAL ADOIL FEE	.	OR.	TOTAL ADOL FEE		
" If the entry in schoom 1 is less than the entry in column 2, write 10" in column 3, " If the "Highest Number Previously Paid For" IN THIS "PACE is less than 20, enter 20".								The same of the sa	***************************************	
THE SEMEST	Market Caralina	ì	I'm a tran 'za i nan	a sure ser cardo.						

This collection of betweetin is required by 37 CFR 1.16. The information is required to obtain or retain a beautify the public which is to tile (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 estrates in complete, handling gathering, preparing, and withouthall the completed application form to the USPTIQ. Time will vary depending upon the included case. Any comments on this encount of time you require to complete this time entire suggestions for enducing this truster, chould be sent to the Chief Information Officer; U.S.P. Petert and Trademark, Office; U.S. Department of Commisco, P.O. Bort 1450, Abstanctia, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commiscoan for Problems, P.O. Bort 1450, Abstanctia, VA 22313-1450.

If you need assistance to completing the form, call 1-800-PTO-0100 and select option 7

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